

COMMENT ON THE DRAFT REGULATIONS PUBLISHED FOR PUBLIC COMMENT IN TERMS OF THE SHORT-TERM INSURANCE ACT NO. 53 OF 1998, (GOVERNMENT GAZETTE 35114), DATED 2 MARCH 2012; AND

THE NOTICE 195 OF 2012 ENTITLED "INVITATION FOR PUBLIC COMMENT ON THE DRAFT FINANCIAL SERVICES LAWS GENERAL AMENDMENT BILL, 2012, PUBLISHED IN GOVERNMENT GAZETTE 35132, DATED 9 MARCH 2012, MORE PARTICULARLY, THE AMENDMENTS TO THE DEFINITION OF "BUSINESS OF A MEDICAL SCHEME" IN SECTION 1(1) OF THE MEDICAL SCHEMES ACT.

1. It is noted that the author is a Director of Ambledown Risk and Underwriting Managers (Ambledown), a Company that provides health insurance products that augment medical scheme cover, and provides health insurance products to those socio-economic groups who cannot afford the most basic of medical scheme benefit options, and that all products are in line with the definition of Health and Accident Policy as Defined in the Short term Insurance Act, 53 of 1998.
2. This submission takes into consideration the Constitution of the Republic Of South Africa 108 of 1996 (The Constitution), including the Promotion of Administrative Justice Act, 3 of 2000 (PAJA), the Promotion of Equality and Prevention of Unfair Discrimination Act, 4 of 2000 (Unfair Discrimination Act), of which both Acts give effect to certain Sections of The Constitution. This submission also takes into consideration the Medical schemes Act 131 of 1998 (MSA), the Short-term Insurance Act (STIA), the Long-term Insurance Act (LTIA), the effect of the Insurance Laws Amendment Act, 27 2008 and the Labour Relations Act, 66 of 1995 (LRA).
3. For the purpose of the submission, the author has studied the Draft Regulations, Government Gazette 35114 (Draft Demarcation Regulations), including the media statement by the Minister of Finance and the document titled "Frequently Asked Questions" published together with the Draft Demarcation Regulations, the Draft Financial Services Laws General Amendment Bill, 2012 (FSLGA), the recently published Council for Medical Schemes (CMS) Annual Report 2010-2011 and the green paper on NHI published 12 August 2011.

4. For the purpose of establishing the effect of the proposed Draft Demarcation Regulations and the proposed amendment to the MSA, the author analysed the benefits provided by 182 medical scheme benefit options representing 29 medical schemes. The total membership (principal members) in the analysis of benefit options is 2 952 039 or approximately 82% of total medical schemes principal members. It is noted that The CMS Annual Report 2010-2011 reported 99 medical Schemes encompassing 294 medical scheme benefit options. The total membership (principal members) reported by the CMS for the period 2010 is 3 612 062. The medical schemes benefit options not studied by the author are mostly restricted schemes where benefit option information was not available.

#### REACTION TO THE DRAFT DEMARCATION REGULATIONS

5. It is submitted that since the publication of the Draft Demarcation Regulations, there has been a considerable amount of distress and disquiet by our policyholders, employer groups, financial advisors and other consumer groups not related to the business of Ambledown.

#### AMBLEDOWN'S VIEW TO HEALTH FINANCE IN SOUTH AFRICA

6. It is submitted that Ambledown believes that the social reforms introduced to the MSA in 1998 are essential, that the provisions in the Act for community rating and guaranteed acceptance provides for much needed cross subsidy from the young and healthy to the old and sick. It is also Ambledown's view that Regulation 8 of the MSA which provides for unlimited cover to certain life-threatening medical conditions are too essential for no reason other than to ensure that medical schemes do not structure a set of benefit options that limit benefits for diseases that are common to the old and/or sick and in so doing shift the burden of cost to other medical schemes that provide properly for all.
7. In 2000 Discovery Health launched their medical scheme benefit structure that was designed to co-exist with an insurance policy that undermined the very social reforms in the form of community rating and guaranteed acceptance. The medical scheme benefit option imposed a R500 excess for each day in hospital and the insurance policy provided a benefit of R500 per

day. The insurance policy premium factors were aged based and Discovery Health was able to reject cover on application. In this instance it was not the product per se that was offensive, but it's application. It is indeed encouraging that Regulation 8 has indeed eradicated such loopholes in the system.

8. It is submitted that Ambledown is of the opinion that this event (Discovery Health's contempt to social reforms) strengthens the requirement that health and accident policies be regulated.
9. Ambledown wishes to note that whilst social reforms in the MSA are vital to health finance in South Africa, that medical scheme membership is only affordable to the minority of privileged South Africans. The green paper on NHI identified that 83.8% of South Africans are excluded from medical scheme membership due to affordability and are thus almost entirely reliant on the public sector for health care.
10. It is the authors view that the CMS has been enormously effective in the management of medical schemes, and that such is evident by the results published in the recent CMS Annual Report; however it has completely ignored and in so doing failed most South Africans in the inadequate manner for which it provided for a Low Income Medical Scheme (LIMS) solution.

#### DRAFT DEMARCATION REGULATIONS ARE IN CONTRADICTION OF EFFECT TO THE LETTER AND SPIRIT OF THE CONSTITUTION

11. It is submitted that the Draft Demarcation Regulations fails to consider any infringement in the rights protected by the provisions of the Bill of Rights.
12. Section 27(1) of The Constitution provides that "everyone has the right to have access to health care services". Section 27(2) of The Constitution provides that the state must take reasonable legislative and other measures, within its available resources, to achieve the progressive realisation of each of these rights.
13. On 16 August 2011, in a media statement by Minister of Health that released the green paper on NHI, the Minister conceded that "*the quality of care in public health institutions is often totally unacceptable*", the minister added that

*injury and violence contribute significantly to the burden of disease and that of note is the significant proportion of injury associated with road accidents and inter-personal violence, particularly, violence against women and children.*

14. The green paper on NHI estimated the cost of NHI to be R255-billion by 2025 in real terms i.e. these are the values in real 2010 financial terms. This represents an additional cost of R130 billion which, based on actual 2010/2011 expenditure, is greater than the combined expenditure of Military, Policing, Correctional Services and Justice Departments. It is therefore a reasonable inference that the State cannot provide adequately for public health.
15. The Draft Demarcation Regulations propose to outlaw affordable insurance products that provide at least a basic level of cover to the individual consumer. An example of affordable health insurance is personal accident insurance.
16. It is submitted that the Draft Demarcation Regulations does not provide for a reasonable legislative measure by the State as required by Section 27(2) of The Constitution. Cognisance must be taken that the Minister declares that public health institutions lacks resources to achieve the progressive realisation of Section 27(1) of The Constitution, before prohibiting the most affordable of health finance products.
17. It is submitted that the author is aware of at least 800,000 South Africans who have either purchased affordable personal accident policies, or for which an employer has purchased such policies on their behalf.
18. Promotion of Equality and Prevention of Unfair Discrimination Act defines "**prohibited grounds**"  
are-
  - a) race, gender, sex, pregnancy, marital status, ethnic or social origin, colour, sexual orientation, age, **disability**, religion, conscience, belief, culture, language and birth; or
  - b) any other ground where discrimination based on that other ground-

- i) causes or perpetuates systemic disadvantage;
- ii) undermines human dignity; or
- iii) adversely affects the equal enjoyment of a person's rights and freedoms in a serious manner that is comparable to discrimination on a ground in paragraph (a);

19. Section 9 of the Promotion of Equality and Prevention of Unfair Discrimination Act prohibits unfair discrimination on ground of disability; *"no person may unfairly discriminate against any person on the ground of disability, including (a) denying or removing from any person who has a disability, any supporting or enabling facility necessary for their functioning in society"*.

20. The Draft Demarcation Regulations seeks to outlaw any insurance programme in place that is in line with the definition of a health and accident policy for which a disabled person is dependent on the benefits of such insurance programme. It simply outlaws such benefits without due consideration of whether such benefit is indeed a supporting and enabling facility for the individual's functioning in society.

21. The Draft Demarcation Regulations single out AIDS/HIV as the only disease for which defraying of medical expenses is permissible.

22. It is submitted singling out AIDS/HIV as the only disease indeed causes or perpetuates systemic disadvantage, that it undermines human dignity to those who are disabled with other life-threatening diseases.

23. The Draft Demarcation Regulations must enable employer driven products that provide for the on-going treatment of AIDS/HIV to continue; and in so doing it must then extend the very privileges it provides for AIDS/HIV victims to employers to make available equally for those who suffer from other life-threatening diseases.

24. It is submitted that employer groups must be extended the opportunity to provide for on-going chronic treatment for any disease that is life-threatening and that employers must have the ability to insure themselves for such contingencies.

25. The Draft Demarcation Regulations should therefore regulate to which socio-economic segments of society such policies may be provided for with due consideration for all disabilities; any deviation from such must be considered as unfair discrimination and in contradiction of effect to the letter and spirit of The Constitution.

#### THE DRAFT DEMARCATION REGULATIONS

26. Section 70 was inserted into STIA by Act 27 of 2008. It made allowance for the Minister to make regulations **not inconsistent with this Act**.

27. Section 70(2A) of STIA makes provision for Regulations

*(a) the Minister despite the definition of "business of a medical scheme" in **section 9(1) of the Medical Schemes Act** may make regulations identifying a kind, type or category of contract as an accident and health policy.*

28. It is submitted that Section 70 of the STIA is in fact erroneous as it refers to the "Business of a Medical Scheme" as defined in Section 9(1) of the MSA. Section 9(1) of the MSA deals with **Committees of Council** and does not define the "Business of a Medical Scheme".

29. In terms of Section 70(2A)(b) *Regulations under paragraph (a): –*

*"(i) Must be made only –*

*aa. In consultation with the Minister of Health*

*bb. After consultation between the National Treasury, the Registrar and the Registrar of Medical Schemes established under the Medical Schemes Act; and*

*cc. After having regard to the objectives and purpose of the MS Act including the following principles entrenched therein –*

*A. Community rating;*

*B. Open enrolment; and*

*C. Cross-subsidization within medical schemes; and*

- (i) *must provide for a short-term insurer or Lloyds underwriter to submit specified information on any product with a kind, type or category of contract referred to in paragraph (a) to the Registrar of Medical Schemes within any specified timeframes.*
- (ii) *may provide for matters relating to the design and marketing of any product within a kind, type or category of contract referred to in paragraph (a).*

c) Where the Minister has *made regulations referred to in paragraph (a), the kind type or category of contract identified as a health policy in the regulations, is **subject to this Act** and not the Medical Schemes Act.*

30. A accident and health policy is defined in the STIA as:

A contract in terms of which a person, in return for premium, undertakes to provide policy benefits if a –

- (a) disability event;
- (b) health event; or
- (c) death event.

contemplated in the contract as a risk, occurs, but excluding any contract—

(d) of which the contemplated policy benefits—

- (i) are something other than a stated sum of money;
  - (ii) are to be provided upon a person having incurred, and to defray, expenditure in respect of any health service obtained as a result of the health event concerned; and
  - (iii) are to be provided to any provider of a health service in return for the provision of such service; or
- (e) (i) of which the policyholder is a medical scheme registered under the Medical Schemes Act. 1967 (Act No. 72 of 1967);

(ii) which relates to a particular member of the scheme or to the beneficiaries of such member; and

(iii) which is entered into by the scheme to fund in whole or in part its liability to such member or beneficiaries in terms of its rules;

and includes a reinsurance policy in respect of such a policy;

31. The Draft Demarcation Regulations specifies categories of contracts identified as accident and health policies under paragraph (b) of the definition in the STIA.

32. In Schedule B "The explanatory memorandum" Annexure 1, reference is made to the definition of an accident and health policy in the STIA that is substantially different to the definition in the STIA. It is therefore submitted that these regulations are **indeed inconsistent with this Act** as required in Section 70 of the STIA.

33. It limits an accident and health policy if that contract matches any of the categories of contracts and meets the criteria and provides policy benefits associated with that category. The categories listed are:

- a. Lump sum or income replacement policies;
- b. Motor: Third Party Liability;
- c. Property: Third Party Liability;
- d. HIV and AIDS;
- e. International Travel Insurance;
- f. Domestic Travel Insurance;
- g. Emergency Evacuation or transport.

34. Section 70 (2A) state that regulation under paragraph (a)

i. **Must be made only ...**

(cc) after having regard to the objectives and purpose of the medical schemes act, including the following principals entrenched therein-

- a. community rating;



- b. open enrolment; and
  - c. cross-subsidisation within medical schemes
35. It is submitted that no insurance policy undermines certain aspects of the objectives and purposes of the MSA as required in section 70 (2A) of the STIA; in particular community rating and open enrolment. Considering the short-lived policy explained in paragraph 7, (Discovery Health's contempt to social reforms) no other insurance policy has been created to co-exist with a medical scheme in order to undermine community rating and no insurance policy can be designed to prevent open enrolment to medical schemes.
36. It is submitted that no consideration whatsoever should be given to classes of short-term insurance including motor, third party liabilities, property, third party liabilities, international travel insurance and domestic travel insurance (Category 2,3,5 and 6) as it is unreasonable to consider these policies have any effect on the purpose of medical schemes in particular community rating, open enrolment and the much needed cross subsidy within medical schemes. Section 7.2, 7.3, 7.4 and section 7.5 of the Draft Demarcation Regulations regulate policies that rely on the definition of a liability policy and a miscellaneous policy in the STIA. It is submitted that these policies must be considered as something other than a health and accident policy.
37. Of considerable note is Regulation 7(2)(b) whereby an insurer is not permitted to refuse a claim for policy benefits on the grounds that a policyholder or insured person had experienced a health event prior to the commencement of the applicable cover. Such is inconsistent with the STIA. The definition of "risk" in the STIA "*means a possibility that a particular event may occur **during the period for which a short term policy is operative***". Such may have serious financial implication to Insurers that provide liability and travel (miscellaneous) policies. It is therefore submitted that these regulation are indeed inconsistent with this Act as required in Section 70 of the STIA.
38. It is submitted that AIDS/HIV (Category 4) is in contradiction of effect to the letter and spirit of The Constitution as explained in paragraphs 21 to 25 above.
39. It is submitted that AIDS/HIV (Category 4) is also offered to individuals often structured in a manner that a policyholder who is HIV negative is offered

protection in the event that any incident may result in such person being infected with the HIV. Such policies do not have any effect on the purpose of medical schemes in particular community rating, open enrolment and cross subsidy within medical schemes and should therefore be allowed.

40. Lump sum or income replacement policies (Category 1) are allowed, but the criteria limits the cover to 70% of the policyholder's net income per day. In this instance the good of the few outweigh the good of the many. The Draft Demarcation Regulations therefore propose that Hospital Cash Policies are in fact designed to attract medical scheme membership and as a result they are undermining the general health risk pool of medical schemes; as explained by the Minister in paragraph 3 of Schedule B "*may result in – younger and healthier persons terminating ... their medical scheme cover*".
41. It is submitted that the author is aware that there are millions of South Africans who cannot afford the most basic of medical scheme covers and that such policies provide for much needed financial relief, that the assumption that these policies attract the young and healthy medical scheme members is speculative and only considers the privileged few of our society. It is also submitted that no evidence exists that such policies have any material effect on the cross subsidy within medical schemes.

#### CATEGORIES OF COVER EXCLUDED IN THE DRAFT DEMARCATION REGULATIONS

42. There are no transitional requirements for sick funds registered in terms of the Labour Relations Act. The Department of Labour is of the view that such schemes, which are now continued in terms of bargaining council collective agreements or which were established prior to 1 February 1999 under section 43(1) C of the LRA, are not subject to the MSA. The effect of the proposed Draft Demarcation Regulations is that it also unfairly excludes a reinsurance contract between a sick fund and an insurer.
43. It is unclear whether dreaded disease and critical illness policies are permissible due to the lack of clarity as to which definition of a health and accident policy the Draft Demarcation Regulations refer to.

44. Gap cover and top-up policies have been singled out as the primary cause for the Draft Demarcation Regulations. In a joint explanatory press statement by the National Treasury and the Department of Health on the Draft Demarcation Regulations, it was publicly stated that *“The draft Regulations do not propose the phasing out of all health insurance products, but only those which compromise the key principles of social welfare, solidarity and cross-subsidisation found in medical aid schemes (e.g. gap and top covers). **A health insurance policy is not a substitute for being a member of a medical aid scheme.**”*
45. The above reference made to gap and top-up cover in the joint explanatory press statement seems to assume that such policies compromise the key principles of social welfare, solidarity and cross- subsidisation and that they are designed, marketed and provided to the public as a substitute to medical schemes. This shows that no understanding exists of what benefits these policies provide and more significantly, that in drafting the regulations, no consideration whatsoever was given to the design and policy conditions that are imposed by Short-term insurers. The following provides some insight into Gap and top-up cover policies.
  - a. Gap and top-up policies provide for benefits over and above the benefits provided by medical schemes.
  - b. Gap cover provides for an event in which the medical practitioner charges a tariff above the benefit afforded by the medical scheme benefit option. The benefits only apply to in-hospital treatment or surgical procedures done on an out-patient basis that traditionally were performed in hospital and where that a medical scheme requires that such procedures be performed in doctors’ rooms, e.g. scopes, and tonsillectomies.
  - c. Top-up cover provides for the overall or any hospital limitation imposed by the medical scheme.
  - d. Regulation 8 of the MSA prohibits a medical scheme from limiting any PMB condition and therefore benefits provided by gap and top-up cover must exclude such medical conditions.

46. These policies can in no way replace medical scheme membership, in fact gap and top-up policies usually have a condition requiring that the policyholder is a member of a registered medical scheme.
47. It has already been established that health and accident policies cannot give effect to community rating and open enrolment in paragraph 31. It is submitted that gap and top-up cover policies do not result in the reduction of or elimination of cross subsidisation of medical schemes.
48. It has been established in the SCA in the matter between Guardrisk Insurance Company Limited vs. Registrar of Medical Schemes and another (Case No: 168/07) that *[21] Although the provisions of the MS Act fundamentally changed the operation of medical schemes in that membership of a medical scheme and, through that, access to core health and medical services were made accessible to a broader spectrum of people, as discriminatory considerations based on age, sex and health status are no longer permissible and differentiation between members may only occur on the basis of income and number of dependants, there is no factual indication before us that the policies of the appellant are undermining or would undermine the MS Act, or would in any way affect the viability of medical schemes in general; and [22] Practical reality has shown that there exists a need for this type of insurance and there seems to be no reason why it should not be permitted.*
49. It is submitted gap and top-up cover policies that represent at least 95% of the current gap and top-up cover policyholders are policies that apply the very basic principles of community rating and open enrolment. These policy are flat rated (a single premium rate), usually regardless of the family size; they do not impose age limitations and do not discriminate as per Section 29 5(a) of The Constitution that deals with insurance matters. It is also submitted that underwriting resembles that of Regulation 11 of the MSA that defines the term "late joiners", whilst it is uncommon that policy premiums are increased, waiting periods are often imposed unless the policyholder was covered by a similar policy.

## FINDINGS OF THE ANALYSIS DONE ON BENEFITS PROVIDED BY MEDICAL SCHEMES

50. As described in paragraph 4, for the purpose of establishing the effect of the proposed Draft Demarcation Regulations and the proposed amendment to the MSA, the author analysed the benefits provided by 182 medical scheme benefit options representing 29 medical schemes. The total membership (principal members) in the analysis is 2 952 039 or approximately 82% of total medical schemes principal members. The findings are as follows:
51. The majority of medical scheme benefit options (almost two thirds) only provide for 100% of the medical scheme tariff for specialist procedure performed in hospital. The following tables show the number and percentage of medical scheme tariffs provided by the medical scheme benefit options in the study.

*Table one – reimbursement rate of South African Medical Scheme Benefit Options.*

<b>Reimbursement rate</b>	<b>Number of Benefit Options</b>	<b>% of Total</b>
100%	120	66%
120%	2	1%
125%	2	1%
150%	8	4%
200%	34	19%
300%	13	7%
100%/200%	3	2%
<b>Grand Total</b>	<b>182</b>	<b>100%</b>

*Table two – reimbursement rate of South African Medical Scheme Benefit Options by total principal members.*

<b>Re-imburement rate</b>	<b>Total Principal Members</b>	<b>% of Total</b>
100%	2,075,170	70%
120%	17,103	1%
125%	68,825	2%
150%	32,292	1%
200%	681,224	23%
300%	51,993	2%
100%/200%	25,431	1%
<b>Grand Total</b>	<b>2,952,039</b>	<b>100%</b>

Data for the above statistics is available in annexure "A" attached to this document.

52. The study confirms that approximately 70% of total medical scheme members are limited to 100% of the medical scheme tariff. It is expected that the medical scheme benefit options not included in this analysis will have very similar outcomes to the reimbursement rates statistics provided above.
53. It is well-known that almost every South African anaesthetist in the private sector charges between 350% and 440% of the average medical scheme tariff. The author chose to comment on the rating patterns of anaesthetist's as every surgical procedure that requires general anaesthetic requires the service of an anaesthetist and is therefore the most common specialist service for surgery. Whilst I am not able to provide exact statistics of anaesthetist rates, given the time constraints for comment on the Draft Demarcation Regulations, I submit that the tariff generally applied by anaesthetists is common knowledge to those that administer health benefits.
54. It is also submitted that such gap and top-up policies do not result in members of a medical scheme buying down or selecting cheaper option due to the gap and top-up cover policies;
  - a. medical Scheme benefit options are not arranged in a manner that would allow for such; and
  - b. this is confirmed by the latest CMS annual report which identifies affordability as the primary reason for downgrading benefits options. *"An online survey was conducted to understand how members of medical schemes choose or change a benefit option. The study revealed that the most common reason why members change from one option to another is due to affordability, i.e. when contributions become too expensive and unaffordable, members buy down to cheaper benefit options"*
55. It is submitted that medical schemes do not limit tariff due to the availability of gap and top-up products. There is a trend by most medical schemes to reduce benefits. This is due to pressure from the consumer to provide affordable contribution increases, and due to the restrictions imposed by the registrar of medical schemes to keep annual medical scheme contribution increases below a certain percentage.
56. Based on the requirement in Section 70(2A)(b) (i) such regulation must be made only (cc) after having regard to the objectives and purpose of the MSA, including the principles entrenched therein (A) community rating; (B) open

enrolment (C) cross-subsidisation within medical schemes. There is no statistical evidence provided by the Regulator that such principles are undermined by gap and top-up policies because such statistical evidence cannot exist.

57. It is submitted in the strongest possible way that the outlawing of such policies will have dire financial effect on an estimated 800,000 consumers who are beneficiaries of gap cover policies and are indeed dependent on the benefits provided by these policies; that the absence of gap cover policies will, for every year it is outlawed, result in tens of thousands of individual being indebted to medical practitioners beyond their financial means and that the pooling of this benefit provided by insurers is a vital aspect of private health finance in South Africa.
58. It is submitted that it is a fact that
  - a. no medical scheme benefit option provides adequately for charges by medical practitioners;
  - b. such shortfalls range between R500 and R100,000; and
  - c. the majority of shortfalls are between R6,000 and R8,000.
59. The Draft Demarcation Regulations will therefore deny consumers their democratic right to provide properly for such an event. It cannot be ignored and it must prevail.

THE AMENDMENTS TO THE DEFINITION OF "BUSINESS OF A MEDICAL SCHEME" IN SECTION 1(1) OF THE MEDICAL SCHEMES ACT AS PER THE DRAFT FINANCIAL SERVICES LAWS GENERAL AMENDMENT BILL.

60. In relation to the Bill, it endeavours to amend the definition of "business of a medical scheme" as it currently appears in section 1(1) of the MSA.
61. Section 20 of the MSA requires that no person shall carry on the business of a medical scheme unless that person is registered as a medical scheme under Section 24 of the MSA.
62. The proposed definition of "business of a medical scheme" read together with Section 20 of the MSA is in contradiction to the Draft Demarcation Regulations, in particular the permissible categories of health and accident products that defray medical expenses which include AIDS/HIV, treatment for frail care and emergency evacuation or transportation.

63. For this reason, it is illogical that both laws be promulgated concurrently.
64. The proposed amendments to the definition results in making it all-encompassing and does not consider the needs of the vast majority of South Africans as described in paragraphs 11 to 25.



## ANNEXURE A – analysis of medical scheme reimbursement tariff and membership volume.

SCHEME NAME	OPTION TITLE	RE-IMBURSEMENT RATE	YEAR	HOSPITAL RE-IMBURSEMENT RATE	SCHEME (OPTION) AGE PROFILE AND PENSIONER RATIO	SCHEME AND OPTION PRINCIPAL MEMBER COUNT
Medshield Medical Scheme	MediBonus (Groups only)	100%/200%	2012	100% - 200% (Gap cover for certain procedures)	Average age- 34.6(37.2); Pensioner %-8.6%(7.7%)	Scheme - 113 364 This Option - 10 666
Medshield Medical Scheme	Premium Plus	100%/200%	2012	100% - 200% (Gap cover for certain procedures)	Average age- 34.6(38.3); Pensioner %-8.6%(21.6%)	Scheme - 113 364 This Option - 8 136
Resolution Health Medical Scheme	Prestige	100%/200%	2012	100% of Scheme Rate plus specialist cover (220%)	Average age- 31.4(35.8); Pensioner %- 3.8%(7.5%)	Scheme - 27 814 This Option - 6 630
Resolution Health Medical Scheme	Progressive Flex	100%/150%	2012	100% of Scheme Rate plus specialist cover (150%)	Average age- 31.4; Pensioner %- 3.8% - New Option	Scheme - 27 814 This Option - New Option
Resolution Health Medical Scheme	Progressive Saver	100%/150%	2012	100% of Scheme Rate plus specialist cover (150%)	Average age- 31.4; Pensioner %- 3.8% - New Option	Scheme - 27 814 This Option - New Option
Bankmed Medical Scheme	Plus	300%	2012	100% of cost (DSP & State hospitals)	Average age- 30.0(42.8); Pensioner %- 6.4%(19.6%)	Scheme - 101 139 This Option - 6 766
Bonitas Medical Fund	BonComprehensive	300%	2012	300% of Scheme Tariff (Bonitas Rate)	Average age- 30.9(38.2); Pensioner %- 4.7%(12.5%)	Scheme - 268 359 This Option - 3 972
Camaf Medical Fund	Alliance	300%	2012	GP/specialist cover	Average age- 29.0(40.7); Pensioner %- 5.0%(17.0%)	Scheme - 23 487 This Option - 1 026
Camaf Medical Fund	Double Plus	300%	2012	100% of Scheme Tariff, 300% GP/specialist cover	Average age- 29.0(28.3); Pensioner %- 5.0%(4.3%)	Scheme - 23 487 This Option - 8 838
Camaf Medical Fund	Vital	300%	2012	100% of Scheme negotiated Tariff	Average age- 29.0(30.3); Pensioner %- 5.0%(5.2%)	Scheme - 23 487 This Option - 5 012
Discovery Health Medical Scheme	Executive	300%	2012	300% of Scheme Tariff/ Specialist cover included	Average age- 31.6(36.9); Pensioner %- 6.1%(11.6%)	Scheme - 1 019 419 This Option - 11 348
Fedhealth Medical Scheme	Maxima Plus	300%	2012	100% of Scheme Tariff/ Specialist network/200%-300% non network provider cover	Average age- 35.9(44.0); Pensioner %- 8.6%(14.0%)	Scheme - 77 737 This Option - 1 353
Fedhealth Medical Scheme	Ultima 300	300%	2012	100% of Scheme Tariff/ Specialist network/200%-300% non network provider cover	Average age- 35.9(54.4); Pensioner %- 8.6%(34.6%)	Scheme - 77 737 This Option - 2 774
Fedhealth Medical Scheme	Ultimax	300%	2012	100% of Scheme Tariff/ Specialist network/200%-300% non network provider cover	Average age- 35.9(58.1); Pensioner %- 8.6%(41.2%)	Scheme - 77 737 This Option - 645
Momentum Health Medical Scheme	Summit	300%	2012	100% of Scheme Tariff, 300% specialist cover	Average age- 33.2(53.3); Pensioner %- 8.0%(35.2%)	Scheme - 88 861 This Option - 1 874
Proimed Medical Scheme	ProActive Plus	300%	2012	100% of Scheme neg. Tariff + 300% Specialist cover	Average age- 37.3(31.4); Pensioner %- 10.7%(4.4%)	Scheme - 25 488 This Option - 3 630
Proimed Medical Scheme	ProPinnacle	300%	2012	100% of Scheme neg. Tariff + 300% Specialist cover	Average age- 37.3(50.1); Pensioner %- 10.7%(27.8%)	Scheme - 25 488 This Option - 2 412
Proimed Medical Scheme	ProSecure Plus	300%	2012	100% of Scheme neg. Tariff + 300% Specialist cover	Average age- 37.3(42.5); Pensioner %- 10.7%(27.8%)	Scheme - 25 488 This Option - 2 412

					Specialist cover		Pensioner %- 10.7%(17.8%)	This Option - 2 343
Camaf Medical Fund	Essential			2012	100% of Scheme Tariff. 200% GP/specialist cover		New Option	Scheme - 23 487 This Option - New (1/1/2012)
Compare Wellness Medical Scheme	Pinnacle	200%		2012	100% of Agreed Tariff, 200% Specialist cover		Average age- 38.5(46.6); Pensioner %- 12.5%(19.2%)	Scheme - 13 599 This Option - 1 700
Discovery Health Medical Scheme	Classic Comprehensive	200%		2012	200% of Scheme Tariff/ Specialist cover included		Average age- 31.6(35.6); Pensioner %- 6.1%(9.3%)	Scheme - 1 019 419 This Option - 185 384
Discovery Health Medical Scheme	Classic Core	200%		2012	200% of Scheme Tariff/ Specialist cover included		Average age- 31.6(35.2); Pensioner %- 6.1%(8.8%)	Scheme - 1 019 419 This Option - 49 135
Discovery Health Medical Scheme	Classic Delta Comprehensive	200%		2012	200% of Scheme Tariff/ Specialist cover included		Average age- 31.6; Pensioner %- 6.1% - New Option	Scheme - 1 019 419 This Option - New
Discovery Health Medical Scheme	Classic Delta Core	200%		2012	200% of Scheme Tariff/ Specialist cover included		Average age- 31.6; Pensioner %- 6.1% - New Option	Scheme - 1 019 419 This Option - New
Discovery Health Medical Scheme	Classic Delta Saver	200%		2012	200% of Scheme Tariff/ Specialist cover included		Average age- 31.6; Pensioner %- 6.1% - New Option	Scheme - 1 019 419 This Option - New
Discovery Health Medical Scheme	Classic Priority	200%		2012	200% of Scheme Tariff/ Specialist cover included		Average age- 31.6(32.1); Pensioner %- 6.1%(5.6%)	Scheme - 1 019 419 This Option - 91 193
Discovery Health Medical Scheme	Classic Saver	200%		2012	200% of Scheme Tariff/ Specialist cover included		Average age- 31.6(29.6); Pensioner %- 6.1%(4.0%)	Scheme - 1 019 419 This Option - 166 644
Fedhealth Medical Scheme	Maxima Basis	200%		2012	100% of Scheme Tariff/ Specialist network/200% GP cover		Average age- 35.9(31.6); Pensioner %- 8.6%(4.1%)	Scheme - 77 737 This Option - 11 979
Fedhealth Medical Scheme	Maxima Core	200%		2012	100% of Scheme Tariff/ Specialist network/200% GP cover		Average age- 35.9(36.4); Pensioner %- 8.6%(9.2%)	Scheme - 77 737 This Option - 12 117
Fedhealth Medical Scheme	Maxima Exec	200%		2012	100% of Scheme Tariff/ Specialist network/200% GP cover		Average age- 35.9(50.0); Pensioner %- 8.6%(29.5%)	Scheme - 77 737 This Option - 4 006
Fedhealth Medical Scheme	Maxima Standard	200%		2012	100% of Scheme Tariff/ Specialist network/200% GP cover		Average age- 35.9(32.7); Pensioner %- 8.6%(4.0%)	Scheme - 77 737 This Option - 38 469
Fedhealth Medical Scheme	Maxima Standard Net	200%		2012	100% of Scheme Tariff/ Specialist network/200% GP cover		Average age- 35.9(32.7); Pensioner %- 8.6%(4.0%)	Scheme - 77 737 This Option - 38 469
Fedhealth Medical Scheme	Ultima 200	200%		2012	100% of Scheme Tariff/ Specialist network/200%-300% non network provider cover		Average age- 35.9(48.6); Pensioner %- 8.6%(23.6%)	Scheme - 77 737 This Option - 9 342
Genesis Medical Scheme	Private	200%		2012	100% of NHRPL Tariff		Average age- 31.0(31.7); Pensioner %- 5.3%(6.6%)	Scheme - 7 111 This Option - 3 803
Genesis Medical Scheme	Private Comprehensive	200%		2012	100% of NHRPL Tariff		Average age- 31.0(30.1); Pensioner %- 5.3%(3.3%)	Scheme - 7 111 This Option - 1 291
Genesis Medical Scheme	Private Plus	200%		2012	100% of NHRPL Tariff		Average age- 31.0(30.3); Pensioner %- 5.3%(3.9%)	Scheme - 7 111 This Option - 2 017
Liberty Medical Scheme	Platinum Complete	200%		2012	200% of Scheme negotiated Tariff (LMS Rate)		Average age- 34.5(41.7); Pensioner %- 8.8%(17.0%)	Scheme - 72 186 This Option - 8 096

Liberty Medical Scheme	Platinum Focus	200%	2012	200% of Scheme negotiated Tariff (LMS Rate)	Average age- 34.5(41.2); Pensioner %- 8.8%(15.4%)	Scheme - 72 186 This Option - 8 687
Liberty Medical Scheme	Platinum Saver	200%	2012	200% of Scheme negotiated Tariff (LMS Rate)	Average age- 34.5(35.6); Pensioner %- 8.8%(9.3%)	Scheme - 72 186 This Option - 1 959
Momentum Health Medical Scheme	Extender - Any/Any	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(43.1); Pensioner %- 8.0%(18.0%)	Scheme - 88 861 This Option - 5 623
Momentum Health Medical Scheme	Extender - Any/Associated	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(35.3); Pensioner %- 8.0%(6.3%)	Scheme - 88 861 This Option - 1 236
Momentum Health Medical Scheme	Extender - Any/State	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(29.6); Pensioner %- 8.0%(3.5%)	Scheme - 88 861 This Option - 2 724
Momentum Health Medical Scheme	Extender - Associated/Any	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(42.0); Pensioner %- 8.0%(16.1%)	Scheme - 88 861 This Option - 203
Momentum Health Medical Scheme	Extender - Associated/Associated	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(36.6); Pensioner %- 8.0%(10.8%)	Scheme - 88 861 This Option - 268
Momentum Health Medical Scheme	Extender - Associated/State	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(29.1); Pensioner %- 8.0%(2.9%)	Scheme - 88 861 This Option - 1 072
Momentum Health Medical Scheme	Incentive - Any/Any	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(42.1); Pensioner %- 8.0%(17.2%)	Scheme - 88 861 This Option - 12 822
Momentum Health Medical Scheme	Incentive - Any/Associated	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(33.1); Pensioner %- 8.0%(7.1%)	Scheme - 88 861 This Option - 2 484
Momentum Health Medical Scheme	Incentive - Any/State	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(30.7); Pensioner %- 8.0%(4.9%)	Scheme - 88 861 This Option - 9 456
Momentum Health Medical Scheme	Incentive - Associated/Any	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(34.8); Pensioner %- 8.0%(11.0%)	Scheme - 88 861 This Option - 447
Momentum Health Medical Scheme	Incentive - Associated/Associated	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(33.5); Pensioner %- 8.0%(6.1%)	Scheme - 88 861 This Option - 1 054
Momentum Health Medical Scheme	Incentive - Associated/State	200%	2012	100% of Scheme Tariff. 200% specialist cover	Average age- 33.2(30.4); Pensioner %- 8.0%(4.4%)	Scheme - 88 861 This Option - 8 455
Selfmed Medical Scheme	Med Elite	200%	2012	100% of Agreed Tariff plus 200% for Practitioners	Average age- 43.1(55.1); Pensioner %- 21.2%(41.0%)	Scheme - 9 385 This Option - 1 089
Bonitas Medical Fund	BonSave	150%	2012	150% of Scheme Tariff (Bonitas Rate)	Average age- 30.9(27.4); Pensioner %- 4.7%(2.4%)	Scheme - 288 359 This Option - 22 193
KeyHealth Medical Scheme	Equilibrium	150%	2012	100% of Scheme Tariff. 150% specialist cover	Average age- 40.2(35.1); Pensioner %- 15.6%(12.9%)	Scheme - 42 166 This Option - 1 139
LA-Health Medical Scheme	LA Focus	150%	2012	100% of Scheme Tariff. 150% GP/Specialist cover	Average age- 34.4(28.0); Pensioner %- 13.2%(4.3%)	Scheme - 30 260 This Option - 3 553
Nimas Medical Scheme	Supreme	150%	2012	100% of NHRPL, as adjusted annually, 150% Specialist cover	Average age- 40.6(48.4); Pensioner %- 15.7%(29.1%)	Scheme - 9 374 This Option - 426
Pro Sano Medical Scheme	ProVision	150%	2012	100% of NHRPL Tariff plus specialist cover (150%)	Average age- 38.4(33.3); Pensioner %- 12.7%(7.8%)	Scheme - 31 067 This Option - 219
Topmed Medical Scheme	TopMed Hospital	150%	2012	100% of Scheme negotiated Tariff	Average age- 38.2(38.1); Pensioner %- 13.9%(13.6%)	Scheme - 11 226 This Option - 1 306

Topmed Medical Scheme	TopMed Professional		150%	2012	100% of Agreed Tariff plus 150% Specialist cover	Average age- 38.2(45.4); Pensioner %- 13.9%(21.0%)	Scheme - 11 226 This Option - 2 235
Topmed Medical Scheme	TopMed Traditional		150%	2012	100% of Agreed Tariff plus 150% Specialist cover	Average age- 38.2(60.7); Pensioner %- 13.9%(51.9%)	Scheme - 11 226 This Option - 1 221
Bankmed Medical Scheme	Comprehensive		125%	2012	100% of cost (DSP & State hospitals)	Average age- 30.0(31.8); Pensioner %- 6.4%(8.1%)	Scheme - 101 139 This Option - 50 913
Bankmed Medical Scheme	Traditional		125%	2012	100% of cost (DSP & State hospitals)	Average age- 30.0(28.4); Pensioner %- 6.4%(3.9%)	Scheme - 101 139 This Option - 17 912
Profmed Medical Scheme	ProActive		120%	2012	100% of Scheme negotiated Tariff	Average age- 37.3(33.5); Pensioner %- 10.7%(5.6%)	Scheme - 25 488 This Option - 9 713
Profmed Medical Scheme	ProSecure		120%	2012	100% of Scheme negotiated Tariff	Average age- 37.3(40.4); Pensioner %- 10.7%(14.1%)	Scheme - 25 488 This Option - 7 390
Bankmed Medical Scheme	Basic		100%	2012	PMB's only: 100% of cost (DSP & State hospitals) 100% Scheme tariff (Other)	Average age- 30.0(23.7); Pensioner %- 6.4%(0.9%)	Scheme - 101 139 This Option - 15 303
Bankmed Medical Scheme	Core Saver		100%	2012	100% of cost (DSP & State hospitals)	Average age- 30.0(23.9); Pensioner %- 6.4%(1.2%)	Scheme - 101 139 This Option - 11 552
Bestmed Medical Scheme	Beat 1		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(32.4); Pensioner %- 11.9%(5.1%)	Scheme - 66 313 This Option - 1 671
Bestmed Medical Scheme	Beat 2		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(35.1); Pensioner %- 11.9%(2.9%)	Scheme - 66 313 This Option - 6 444
Bestmed Medical Scheme	Beat 3		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(35.1); Pensioner %- 11.9%(10.2%)	Scheme - 66 313 This Option - 6 577
Bestmed Medical Scheme	Pace 1 (Bonus Plus)		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(32.8); Pensioner %- 11.9%(4.4%)	Scheme - 66 313 This Option - 15 872
Bestmed Medical Scheme	Pace 2 (New Option + Mill. Comp.)		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(32.8); Pensioner %- 11.9%(4.4%)	Scheme - 66 313 This Option - 15 872
Bestmed Medical Scheme	Pace 3 (Topcare)		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(41.8); Pensioner %- 11.9%(17.3%)	Scheme - 66 313 This Option - 6 265
Bestmed Medical Scheme	Pace 4 (Platinum)		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(47.1); Pensioner %- 11.9%(21.7%)	Scheme - 66 313 This Option - 6 252
Bestmed Medical Scheme	Pulse 1 (BluePrint)		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(30.7); Pensioner %- 11.9%(5.8%)	Scheme - 66 313 This Option - 9 628
Bestmed Medical Scheme	Pulse 2 (Best Gold Select + Best Gold)		100%	2012	100% of Scheme negotiated Tariff (Bestmed Tariff)	Average age- 37.2(60.1); Pensioner %- 11.9%(52.4%)	Scheme - 66 313 This Option - 1 831
Bonitas Medical Fund	BonCap		100%	2012	100% of Prime Cure Agreed Tariff	Average age- 30.9(34.6); Pensioner %- 4.7%(4.9%)	Scheme - 268 359 This Option - 25 608
Bonitas Medical Fund	BonEssential		100%	2012	100% of Scheme Tariff (Bonitas Rate)	Average age- 30.9(30.0); Pensioner %- 4.7%(4.0%)	Scheme - 268 359 This Option - 499
Bonitas Medical Fund	Primary		100%	2012	100% of Scheme Tariff (Bonitas Rate)	Average age- 30.9(27.0); Pensioner %- 4.7%(1.8%)	Scheme - 268 359 This Option - 52 601
Bonitas Medical Fund	Standard		100%	2012	100% of Scheme Tariff (Bonitas Rate)	Average age- 30.9(32.3); Pensioner %- 4.7%(5.7%)	Scheme - 268 359 This Option - 163 486

Camaf Medical Fund	First Choice Network Choice (Salary <R14,750)	100%	2012	100% of Scheme negotiated Tariff	Average age- 29.0(28.2); Pensioner %- 5.0%(4.9%)	Scheme - 23 487 This Option - 6 632
Camaf Medical Fund	Network Choice (Salary >R14,750)	100%	2012	100% of DSP negotiated Tariff	Average age- 29.0(23.3); Pensioner %- 5.0%(0.4%)	Scheme - 23 487 This Option - 1 979
Camaf Medical Fund	De Lux	100%	2012	100% of DSP negotiated Tariff 100% of Scheme Tariff. 200% specialist cover	Average age- 29.0(23.3); Pensioner %- 5.0%(0.4%)	Scheme - 23 487 This Option - 1 979
Commed Medical Scheme	Fundamental	100%	2012	100% of Scheme negotiated Tariff	Average age- 37.3(36.9); Pensioner %- 11.4%(10.6%)	Scheme - 9 903 This Option - 3 035
Commed Medical Scheme	Standard	100%	2012	100% of Scheme negotiated Tariff	Average age- 37.3(34.2); Pensioner %- 11.4%(7.5%)	Scheme - 9 903 This Option - 6 370
Compare Wellness Medical Scheme	Axis	100%	2012	100% of Agreed Tariff	Average age- 38.5(43.4); Pensioner %- 12.5%(15.6%)	Scheme - 13 599 This Option - 739
Compare Wellness Medical Scheme	Dynamix	100%	2012	100% of Agreed Tariff	Average age- 38.5(42.8); Pensioner %- 12.5%(18.3%)	Scheme - 13 599 This Option - 2 516
Compare Wellness Medical Scheme	Mumed	100%	2012	100% of Agreed Tariff	Average age- 38.5(31.7); Pensioner %- 12.5%(6.5%)	Scheme - 13 599 This Option - 3 296
Compare Wellness Medical Scheme	NetworkX	100%	2012	100% of Agreed Tariff	Average age- 38.5(34.7); Pensioner %- 12.5%(0.8%)	Scheme - 13 599 This Option - 1 211
Compare Wellness Medical Scheme	Symmetry	100%	2012	100% of Agreed Tariff	Average age- 38.5(37.9); Pensioner %- 12.5%(12.6%)	Scheme - 13 599 This Option - 4 137
Discovery Health Medical Scheme	Coastal Core	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6(34.1); Pensioner %- 6.1%(7.6%)	Scheme - 1 019 419 This Option - 87 910
Discovery Health Medical Scheme	Coastal Saver	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6(30.3); Pensioner %- 6.1%(4.1%)	Scheme - 1 019 419 This Option - 137 813
Discovery Health Medical Scheme	Essential Comprehensive	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6(36.2); Pensioner %- 6.1%(11.8%)	Scheme - 1 019 419 This Option - 34 493
Discovery Health Medical Scheme	Essential Core	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6(33.2); Pensioner %- 6.1%(7.3%)	Scheme - 1 019 419 This Option - 19 288
Discovery Health Medical Scheme	Essential Delta Comprehensive	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6; Pensioner %- 6.1% - New Option	Scheme - 1 019 419 This Option - New
Discovery Health Medical Scheme	Essential Delta Core	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6; Pensioner %- 6.1% - New Option	Scheme - 1 019 419 This Option - New
Discovery Health Medical Scheme	Essential Delta Saver	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6; Pensioner %- 6.1% - New Option	Scheme - 1 019 419 This Option - New
Discovery Health Medical Scheme	Essential Priority	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6(32.0); Pensioner %- 6.1%(7.8%)	Scheme - 1 019 419 This Option - 9 852
Discovery Health Medical Scheme	Essential Saver	100%	2012	100% of Scheme Tariff/Contracted Specialists paid fully	Average age- 31.6(28.6); Pensioner %- 6.1%(4.1%)	Scheme - 1 019 419 This Option - 59 919
Discovery Health Medical Scheme	KeyCare Core	100%	2012	100% of Scheme Tariff/ Specialist cover included	Average age- 31.6(31.8); Pensioner %- 6.1%(6.4%)	Scheme - 1 019 419 This Option - 16 416

Discovery Health Medical Scheme	KeyCare Plus	100%	2012	100% of Scheme Tariff Specialist cover included	Average age- 31.6(26.4); Pensioner %- 6.1%(3.0%)	Scheme - 1 019 419 This Option - 169 067
Fedhealth Medical Scheme	Blue Door	100%	2012	100% of Scheme negotiated Tariff	Average age- 35.9(25.0); Pensioner %- 8.6%(0.2%)	Scheme - 77 737 This Option - 986
Fedhealth Medical Scheme	Maxima Entryzone	100%	2012	100% of Scheme negotiated Tariff	Average age- 35.9(28.2); Pensioner %- 8.6%(1.8%)	Scheme - 77 737 This Option - 72
Gems Medical Scheme	Beryl	100%	2012	100% of Scheme negotiated Tariff	Average age- 26.9(28.3); Pensioner %- 2.6%(3.2%)	Scheme - 520 477 This Option - 12 369
Gems Medical Scheme	Emerald	100%	2012	100% of Scheme negotiated Tariff	Average age- 26.9(26.1); Pensioner %- 2.6%(2.1%)	Scheme - 520 477 This Option - 409 119
Gems Medical Scheme	Onyx	100%	2012	100% of Scheme negotiated Tariff	Average age- 26.9(38.0); Pensioner %- 2.6%(11.7%)	Scheme - 520 477 This Option - 37 910
Gems Medical Scheme	Ruby	100%	2012	100% of Scheme negotiated Tariff	Average age- 26.9(26.1); Pensioner %- 2.6%(1.6%)	Scheme - 520 477 This Option - 36 238
Gems Medical Scheme	Sapphire	100%	2012	100% of Scheme negotiated Tariff	Average age- 26.9(27.1); Pensioner %- 2.6%(1.4%)	Scheme - 520 477 This Option - 24 841
Genesis Medical Scheme	Private Choice	100%	2012	100% of NHRPL Tariff	Average age- 31.0; Pensioner %- 5.3% - New Option	Scheme - 7 111 This Option - New Option
Hosmed Medical Scheme	Plus Plan	100%	2012	100% of Scheme negotiated Tariff	Average age- 30.5(30.4); Pensioner %- 2.2%(2.3%)	Scheme - 38 202 This Option - 9 581
Hosmed Medical Scheme	Step Plan	100%	2012	100% of Scheme negotiated Tariff	Average age- 30.5(33.2); Pensioner %- 2.2%(2.1%)	Scheme - 38 202 This Option - 12 948
Hosmed Medical Scheme	Value Plan	100%	2012	100% of Scheme negotiated Tariff	Average age- 30.5(29.4); Pensioner %- 2.2%(2.2%)	Scheme - 38 202 This Option - 15 673
KeyHealth Medical Scheme	Essence	100%	2012	100% of Scheme negotiated Tariff	Average age- 40.2(34.1); Pensioner %- 15.6%(9.8%)	Scheme - 42 166 This Option - 1 718
KeyHealth Medical Scheme	Gold	100%	2012	100% of Scheme negotiated Tariff	Average age- 40.2(39.6); Pensioner %- 15.6%(14.1%)	Scheme - 42 166 This Option - 24 871
KeyHealth Medical Scheme	Platinum	100%	2012	100% of Scheme negotiated Tariff	Average age- 40.2(51.1); Pensioner %- 15.6%(30.4%)	Scheme - 42 166 This Option - 6 919
KeyHealth Medical Scheme	Silver	100%	2012	100% of Scheme negotiated Tariff	Average age- 40.2(36.5); Pensioner %- 15.6%(11.6%)	Scheme - 42 166 This Option - 7 519
LA-Health Medical Scheme	LA Active	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4(27.6); Pensioner %- 13.2%(4.04%)	Scheme - 30 260 This Option - 13 232
LA-Health Medical Scheme	LA Comprehensive	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4(57.3); Pensioner %- 13.2%(45.9%)	Scheme - 30 260 This Option - 3 211
LA-Health Medical Scheme	LA Core	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4(57.3); Pensioner %- 13.2%(43.9%)	Scheme - 30 260 This Option - 6 304
LA-Health Medical Scheme	LA KeyPlus	100%	2012	Designated Private Hospitals(Discovery KeyCare network)	Average age- 34.4(26.0); Pensioner %- 13.2%(1.3%)	Scheme - 30 260 This Option - 3 960
Liberty Medical Scheme	Bona Plus	100%	2012	100% of Scheme negotiated Tariff (LMS Rate)	Average age- 34.5(30.4); Pensioner %- 8.8%(5.9%)	Scheme - 72 186 This Option - 7 434

Liberty Medical Scheme	Gold Focus	100%	2012	100% of Scheme negotiated Tariff (LMS Rate)	Average age- 34.5(37.1); Pensioner %- 8.8%(10.5%)	Scheme - 72 186 This Option - 8 188
Liberty Medical Scheme	Gold Saver	100%	2012	100% of Scheme negotiated Tariff (LMS Rate)	Average age- 34.5(32.0); Pensioner %- 8.8%(6.7%)	Scheme - 72 186 This Option - 5 620
Liberty Medical Scheme	Titan	100%	2012	100% of Scheme negotiated Tariff (LMS Rate)	Average age- 34.5(31.8); Pensioner %- 8.8%(5.5%)	Scheme - 72 186 This Option - 24 122
Makoti Medical Scheme	Comprehensive Option	100%	2012	Limited to 270 PMB procedures in Private Hospitals	Average age- 30.4(29.6); Pensioner %- 0.5%(0.7%)	Scheme - 3049 This Option - 1 358
Makoti Medical Scheme	Primary Option	100%	2012	Limited to 270 PMB procedures in Public Hospitals	Average age- 30.4(29.1); Pensioner %- 0.5%(0.3%)	Scheme - 3049 This Option - 1 691
Medihelp Medical Scheme	Dimension Elite	100%	2012	100% of Scheme negotiated Tariff	Average age- 39.9(45.8); Pensioner %- 19.0%(21.8%)	Scheme - 123 797 This Option - 27 555
Medihelp Medical Scheme	Dimension Prime 1	100%	2012	100% of Scheme negotiated Tariff	Average age- 39.9(33.7); Pensioner %- 19.0%(8.1%)	Scheme - 123 797 This Option - 9 606
Medihelp Medical Scheme	Dimension Prime 2	100%	2012	100% of Scheme negotiated Tariff	Average age- 39.9(33.7); Pensioner %- 19.0%(9.9%)	Scheme - 123 797 This Option - 10 950
Medihelp Medical Scheme	Dimension Prime 3	100%	2012	100% of Scheme negotiated Tariff	Average age- 39.9(31.4); Pensioner %- 19.0%(6.1%)	Scheme - 123 797 This Option - 23 885
Medihelp Medical Scheme	Medihelp Plus	100%	2012	100% of Scheme negotiated Tariff	Average age- 39.9(69.4); Pensioner %- 19.0%(70.8%)	Scheme - 123 797 This Option - 27 792
Medihelp Medical Scheme	Necesses	100%	2012	100% of Scheme negotiated Tariff	Average age- 39.9(29.0); Pensioner %- 19.0%(3.4%)	Scheme - 123 797 This Option - 20 677
Medshield Medical Scheme	80% Plan	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.6(45.0); Pensioner %- 8.6%(42.0%)	Scheme - 113 364 This Option - 6 703
Medshield Medical Scheme	Core Plus	100%	2012	100% - 200% (Gap cover for certain procedures)	Average age- 34.6(38.0); Pensioner %- 8.6%(26.8%)	Scheme - 113 364 This Option - 30 444
Medshield Medical Scheme	Essential	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.6(42.0); Pensioner %- 8.6%(36.7%)	Scheme - 113 364 This Option - 3 001
Medshield Medical Scheme	MediPlus (Groups only)	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.6(30.8); Pensioner %- 8.6%(3.3%)	Scheme - 113 364 This Option - 44 862
Medshield Medical Scheme	MediValue (Groups only)	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.6(31.1); Pensioner %- 8.6%(3.8%)	Scheme - 113 364 This Option - 16 124
Medshield Medical Scheme	Standard Cover	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.6(33.8); Pensioner %- 8.6%(9.9%)	Scheme - 113 364 This Option - 34 264
Momentum Health Medical Scheme	Access	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.2(29.7); Pensioner %- 8.0%(4.3%)	Scheme - 88 861 This Option - 7 703
Momentum Health Medical Scheme	Custom - Any/Any	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.2(34.1); Pensioner %- 8.0%(9.5%)	Scheme - 88 861 This Option - 2 488
Momentum Health Medical Scheme	Custom - Any/Associated	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.2(29.5); Pensioner %- 8.0%(3.2%)	Scheme - 88 861 This Option - 2 205
Momentum Health Medical Scheme	Custom - Any/State	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.2(27.8); Pensioner %- 8.0%(2.7%)	Scheme - 88 861 This Option - 2 673

Momentum Health Medical Scheme	Custom - Associated/Any	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.2(35.8); Pensioner %- 8.0%(8.2%)	Scheme - 88 861 This Option - 227
Momentum Health Medical Scheme	Custom - Associated/Associated	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.2(31.7); Pensioner %- 8.0%(5.9%)	Scheme - 88 861 This Option - 1 389
Momentum Health Medical Scheme	Custom - Associated/State	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.2(28.0); Pensioner %- 8.0%(2.3%)	Scheme - 88 861 This Option - 11 469
Momentum Health Medical Scheme	Ingwe Option - Network/CareCross	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4; Pensioner %- 8.0% - New Option	Scheme - 88 861 This Option - New Option
Momentum Health Medical Scheme	Ingwe Option - Network/Primecure	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4; Pensioner %- 8.0% - New Option	Scheme - 88 861 This Option - New Option
Momentum Health Medical Scheme	Ingwe Option - Network/Primecure.CareCross	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4; Pensioner %- 8.0% - New Option	Scheme - 88 861 This Option - New Option
Momentum Health Medical Scheme	Ingwe Option - State/CareCross	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4; Pensioner %- 8.0% - New Option	Scheme - 88 861 This Option - New Option
Momentum Health Medical Scheme	Ingwe Option - State/Primecure	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4; Pensioner %- 8.0% - New Option	Scheme - 88 861 This Option - New Option
Momentum Health Medical Scheme	Ingwe Option - State/Primecure.CareCross	100%	2012	100% of Scheme negotiated Tariff	Average age- 34.4; Pensioner %- 8.0% - New Option	Scheme - 88 861 This Option - New Option
Nimas Medical Scheme	Classic	100%	2012	100% of NHRPL, as adjusted annually	Average age- 40.6(36.9); Pensioner %- 15.7%(10.3%)	Scheme - 9 374 This Option - 5 557
Nimas Medical Scheme	Core	100%	2012	100% of NHRPL, as adjusted annually	Average age- 40.6(New); Pensioner %- 15.7%(New)	Scheme - 9 374 This Option - New Option
Nimas Medical Scheme	Millennium	100%	2012	100% of NHRPL, as adjusted annually	Average age- 40.6(45.7); Pensioner %- 15.7%(22.7%)	Scheme - 9 374 This Option - 3 391
Pro Sano Medical Scheme	ProCedure	100%	2012	100% of Scheme negotiated Tariff	Average age- 37.3(34.6); Pensioner %- 10.7%(8%)	Scheme - 31 067 This Option - 249
Pro Sano Medical Scheme	ProClassic	100%	2012	100% of Scheme negotiated Tariff	Average age- 38.4(40.2); Pensioner %- 12.7%(14.9%)	Scheme - 31 067 This Option - 21 360
Pro Sano Medical Scheme	ProElite	100%	2012	100% of Scheme Tariff plus 200% Specialist cover	Average age- 38.4(33.7); Pensioner %- 12.7%(5.1%)	Scheme - 31 067 This Option - 1 223
Pro Sano Medical Scheme	ProVider	100%	2012	100% of Scheme negotiated Tariff	Average age- 38.4(34.8); Pensioner %- 12.7%(9.8%)	Scheme - 31 067 This Option - 3 636
Resolution Health Medical Scheme	Foundation	100%	2012	100% of Scheme Rate	Average age- 31.4(28.8); Pensioner %- 3.8%(2.3%)	Scheme - 27 814 This Option - 2 414
Resolution Health Medical Scheme	Hospital	100%	2012	100% of Scheme Rate	Average age- 31.4(31.2); Pensioner %- 3.8%(3.9%)	Scheme - 27 814 This Option - 6 540
SAMWU/med	Option A	100%	2012	100% of Scheme negotiated Tariff	Average age- 30.4(32.2); Pensioner %- 3.8%(5.4%)	Scheme - 30 888 This Option - 16 179
SAMWU/med	Option B	100%	2012	100% of Scheme negotiated Tariff	Average age- 30.4(28.5); Pensioner %- 3.8%(2.1%)	Scheme - 30 888 This Option - 14 709
Selfmed Medical Scheme	80% Plan	100%	2012	100% of Agreed Tariff	Average age- 43.1(58.3);	Scheme - 9 385



							Pensioner % - 21.2%(48.1%)	This Option - 859
Selfmed Medical Scheme	MEDXXI	100%	2012	100% of Agreed Tariff	Average age- 43.1(43.7); Pensioner % - 21.2%(19.8%)	100%	Average age- 43.1(43.7); Pensioner % - 21.2%(19.8%)	Scheme - 9 385 This Option - 4 269
Selfmed Medical Scheme	Selfsure	100%	2012	100% of Agreed Tariff	Average age- 43.1(35.2); Pensioner % - 21.2%(11.1%)	100%	Average age- 43.1(35.2); Pensioner % - 21.2%(11.1%)	Scheme - 9 385 This Option - 3 168
Sizwe Medical Scheme	Affordable	100%	2012	100% of Scheme negotiated Tariff	Average age- 32.3 (32.8); Pensioner % - 6.8%(7.6%)	100%	Average age- 32.3 (32.8); Pensioner % - 6.8%(7.6%)	Scheme - 66 199 This Option - 28 192
Sizwe Medical Scheme	Full Budget	100%	2012	100% of Scheme negotiated Tariff	Average age- 32.3 (40.3); Pensioner % - 6.8%(15.9%)	100%	Average age- 32.3 (40.3); Pensioner % - 6.8%(15.9%)	Scheme - 66 199 This Option - 11 601
Sizwe Medical Scheme	Primary	100%	2012	100% of Scheme negotiated Tariff	Average age- 32.3 (28.7); Pensioner % - 6.8%(2.8%)	100%	Average age- 32.3 (28.7); Pensioner % - 6.8%(2.8%)	Scheme - 66 199 This Option - 26 406
Spectramed Medical Scheme	Spectra Aqua	100%	2012	100% of Scheme negotiated Tariff	Average age- 35.1(37.5); Pensioner % - 8.1%(11.0%)	100%	Average age- 35.1(37.5); Pensioner % - 8.1%(11.0%)	Scheme - 40 450 This Option - 1 035
Spectramed Medical Scheme	Spectra Azure	100%	2012	100% of Scheme negotiated Tariff	Average age- 35.1(34.9); Pensioner % - 8.1%(7.0%)	100%	Average age- 35.1(34.9); Pensioner % - 8.1%(7.0%)	Scheme - 40 450 This Option - 24 596
Spectramed Medical Scheme	Spectra Capri	100%	2012	100% of Scheme negotiated Tariff	Average age- 35.1(38.0); Pensioner % - 8.1%(10.2%)	100%	Average age- 35.1(38.0); Pensioner % - 8.1%(10.2%)	Scheme - 40 450 This Option - 2 934
Spectramed Medical Scheme	Spectra Cobalt	100%	2012	100% of Scheme negotiated Tariff	Average age- 35.1(54.3); Pensioner % - 8.1%(35.0)	100%	Average age- 35.1(54.3); Pensioner % - 8.1%(35.0)	Scheme - 40 450 This Option - 1 191
Spectramed Medical Scheme	Spectra Cyan	100%	2012	100% of Scheme negotiated Tariff	Average age- 35.1(33.0); Pensioner % - 8.1%(7.4%)	100%	Average age- 35.1(33.0); Pensioner % - 8.1%(7.4%)	Scheme - 40 450 This Option - 10 694
Suremed Health Medical Scheme	Challenger	100%	2012	100% of Scheme negotiated Tariff, 150% Specialist cover	Average age- 33.3(36.6); Pensioner % - 6.1%(11.9%)	100%	Average age- 33.3(36.6); Pensioner % - 6.1%(11.9%)	Scheme - 1549 This Option - 546
Suremed Health Medical Scheme	Explorer	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.3(27.5); Pensioner % - 6.1%(3.3%)	100%	Average age- 33.3(27.5); Pensioner % - 6.1%(3.3%)	Scheme - 1549 This Option - 175
Suremed Health Medical Scheme	Navigator Plan	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.3(32.7); Pensioner % - 6.1%(3.0%)	100%	Average age- 33.3(32.7); Pensioner % - 6.1%(3.0%)	Scheme - 1549 This Option - 690
Suremed Health Medical Scheme	Shuttle	100%	2012	100% of Scheme negotiated Tariff	Average age- 33.3(28.7); Pensioner % - 6.1%(1.2%)	100%	Average age- 33.3(28.7); Pensioner % - 6.1%(1.2%)	Scheme - 1549 This Option - 138
Topmed Medical Scheme	TopMed Network	100%	2012	100% of Scheme negotiated Tariff	Average age- 38.2(30.4); Pensioner % - 13.9%(4.4%)	100%	Average age- 38.2(30.4); Pensioner % - 13.9%(4.4%)	Scheme - 11 226 This Option - 3 105
Topmed Medical Scheme	TopMed Savings	100%	2012	100% of Scheme negotiated Tariff	Average age- 38.2(34.4); Pensioner % - 13.9%(7.9%)	100%	Average age- 38.2(34.4); Pensioner % - 13.9%(7.9%)	Scheme - 11 226 This Option - 3 359
Umvuzo Medical Scheme	Standard Option	100%	2012	100% of Agreed Tariff	Average age- 29.1(32.0); Pensioner % - 0.4%(0.56%)	100%	Average age- 29.1(32.0); Pensioner % - 0.4%(0.56%)	Scheme - 21 924 This Option - 7 114
Umvuzo Medical Scheme	Supreme Option	100%	2012	100% of Agreed Tariff	Average age- 29.1(30.0); Pensioner % - 0.4%(0.45%)	100%	Average age- 29.1(30.0); Pensioner % - 0.4%(0.45%)	Scheme - 21 924 This Option - 4 712
Umvuzo Medical Scheme	Ultra Affordable Option	100%	2012	100% of Agreed Tariff	Average age- 29.1(32.0); Pensioner % - 0.4%(0.17%)	100%	Average age- 29.1(32.0); Pensioner % - 0.4%(0.17%)	Scheme - 21 924 This Option - 10 098